

## Town of Scituate Board of Health Department

600 Chief Justice Cushing Highway Scituate, Massachusetts 02066 T: (781) 545-8725 F: (781) 545-8866

## **2016 FOOD ESTABLISHMENT PERMIT CHECKLIST**

Name of Food Establishment:		
Address of Establishment:		
Name of Owner:		
Owner's Mailing Address:		
Owner's Email Address:	_	
Owner's Preferred Phone Number:		
Name of Person In Charge (PIC):		
Due Date:	_	
Retail Food Store (# sq. ft.)	OR -	Food Service Establishment (# seats)
Bed & Breakfast		
Residental Kitchen for Retail Sale		
Frozen Dessert		
Milk & Cream License		
CERTIFICATES TO BE PROVIDED TO THE BO ServSafe Certificate Needed (provide for all certified employees, at a m		Charge (PIC))
Allergen Training Certificate Needed (prov	vide for all trained employees, a mi	nimum of one per shift)
Choke Safe Training Needed For Establis (provide for all trained employees, a mini		
\$50.00 Late Fee Added If Complete Pack	age Received After November 20	
	TOTAL FEE TO BE SUBMITTED	
	(check made payable to the Towr	n of Scituate)